Attorney Docket No. PV-12

## DECLARATION AND POWER OF ATTORNEY

(Patent, Design or C-I-P Application)

As a below-named inventor, I hereby declare that:

elieve I am the original, first d for which a patent is sou e specification of which	ight on the invention entitled: <u><b>DE</b>(</u>	ne is listed below) or a	n original, first and joint	inventor (if plural name D CHEMICAL ILLUMIN	s are stated belov Ation Sources	w) of the subject matter which is claimed <u>\$</u>	
X is attached was filed	on	as Applicat	tion Serial No	and was a	mended on		
cknowledge the duty to di erehy claim foreign priority	riewed and understand the conten	its of the above-entitle al to the examination ates Code, §119 of ar filing date before tha	ed specification, including of this application in activity foreign application(s)	g the claims, as amende cordance with Title 37, for patent or inventor's which priority is claimed	ed by any amend Code of Federal certificate listed	(if applicable) ment referred to above.	
COUNTRY		APPLICAT	APPLICATION NO.		IG ar)	PRIORITY CLAIMED UNDER 35 U.S.C. 119	
						YES NO	
	ATIONS CONTINUED ON PAGE 2					YES NO	
institution of the prior Life in Title 37, Code of the	Inited States application in the ma of Federal Regulations, §1.56(a) wi	anner provided by the	first page of Title 35, U	inited States Code, §11 ior application and the(Status)	2, I acknowledge national or PCT in	r of each of the claims of this application the duty to disclose material information international filing date of this application.	
The state of the s		(Filing Date) (Status)		(patented, pending, abandoned) (patented, pending, abandoned)			
inected therewith.	named inventor, I hereby appoint			secute this application a	nd transact all bu	siness in the Patent and Trademark Offic	
SEND CORNESPONDENCE	TO: LaMORTE & ASSOCIATE P.O. BOX 434 Yardley, PA 19			DIRECT TELEPHO CALLS TO:	(21	LaMorte, Esq. 5) 321-6772	
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FULL NAME OF INVENTOR #3	LAST NAME:		FIRST NAME:		MIDDLE N	AME:	
RESIDENCE & CITIZENSHIP	CITY:		STATE OR FOREIGN COUNTRY:		COUNTRY	COUNTRY OF CITIZENSHIP:	
POST OFFICE ADDRESS	POST OFFICE ADDRESS:		CITY:		STATE OR	STATE OR COUNTRY AND ZIP CODE:	
nereby declare that all state ere made with the knowle and that such willful false	NTINUED ON PAGE 2 HEREOF: Nements made herein of my own kradge that willful false statements statements may jeopardize the val	nowledge are true and and the like so made	are punishable by fine on or any patent issuing	r imprisonment, or both thereon.	ief are believed to , under Section 1 ignature of Inven	be true; and further that these stateme 001 of Title 18 of the United States C tor #3	
Signature of Inventor #1	helson	V Wa	-10-01	Renaule			